

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

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PLAINTIFF Tyrone Owens		COURT CASE NUMBER 07C6800								
DEPENDANT Sheriff Tom Dart, et al.		TYPE OF PROCESS S/C								
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Sheriff Tom Dart, Cook County									
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) The Daley Center 50 W. Washington, Chicago, IL 60602, Room 704									
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:										
<table border="1"> <tr> <td>Tyreese Owens, #2207-0076179</td> <td>Number of process to be served with this Form - 285</td> </tr> <tr> <td>Cook County Jail</td> <td>Number of parties to be served in this case</td> </tr> <tr> <td>P.O. Box 089002</td> <td>Check for service on U.S.A.</td> </tr> <tr> <td>Chicago, IL 60608</td> <td></td> </tr> </table>			Tyreese Owens, #2207-0076179	Number of process to be served with this Form - 285	Cook County Jail	Number of parties to be served in this case	P.O. Box 089002	Check for service on U.S.A.	Chicago, IL 60608	
Tyreese Owens, #2207-0076179	Number of process to be served with this Form - 285									
Cook County Jail	Number of parties to be served in this case									
P.O. Box 089002	Check for service on U.S.A.									
Chicago, IL 60608										

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold**FILED**JAN 10 2008
Jan 10 2008
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

12-17-07

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk TD	Date 12-17-07
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I hereby certify and return that ☒ I have personally served, ☐ I have legal evidence of service, ☐ I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Carol McFadden / Receptionist

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.Date of Service
1-2-08Time
11:15 amSignature of U.S. Marshal or Deputy
Scott H. [Signature]

Service Fee 48.00	Total Mileage Charges (including enclaves) .48	Forwarding Fee 0	Total Charges 48.48	Advance Deposits 0	Amount owed to U.S. Marshal or 48.48	Amount of Refund 0
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REMARKS:

1 DUSM / 1 Hour / 1 M. k